K 164

child population since those with active yaws are discouraged from attending school. It is known, however, that bone deformities are produced only in the tertiary stage of the disease. Callanan (1926) noted in about 2,000 cases of yaws in children that 32·1 per cent. of male children and 21·6 per cent. of female children had the disease in the tertiary stage. Hence, even assuming that all children have yaws, and that every case of tertiary yaws involves bony deformity, it is obvious that in at least half of the 62·6 per cent. of male children, and 43·7 per cent. of female children with bone deformities, the occurrence of these deformities cannot be explained as due to yaws.

In addition to bone deformities, 40 per cent. of the boys had some obvious dental defect, 48 per cent. were clinically anæmic, and 62 per cent. suffered from spongy gums. There was also a high incidence of enlarged tonsils and cervical adenitis. The general condition was poor.

Kikuyu girls showed a lower incidence of all defects than the boys and were much superior in general condition.

M 164

The Masai village children present a very different picture, bone and dental defects and anæmia being relatively uncommon.

M [146]

The results of the physical examinations are presented graphically in Graphs 7 to 10. It should be noted that, while there appears to be a correlation between diet and the incidence of bone and dental defects and anæmia, there is none between diet and the incidence of enlarged tonsils and cervical adenitis.

K M 164

Table showing percentage Incidence of different Defects in Kikuyu and Masai Children.

	Kikuyu.		Masai.	
	Boys.	Girls.	Boys.	Girls.
Bone deformities	62·6	43·7	11·7	14·6
Dental caries	13·7	13·1	1·6	3·6
All dental defects	40·0	28·8	8·3	7·3
Anæmia	47·8	38·9	11·7	8·5
Enlarged tonsils	56·0	53·3	35·0	52·4
Cervical adenitis	52·0	47·6	40·0	59·8

K M [143]

In the course of the investigation, records of cases attending native hospitals in the Kikuyu and Masai reserves were examined as to the incidence of various conditions. The data for the Kikuyu include figures from the hospitals at Keruguya, Fort Hall, Nyeri and Githumu. Unfortunately, there is only one hospital in the Masai reserve, that at Narok, the seat of the district commissioner and a trading centre. The patients are therefore not all Masai, about 20 per cent. being Indians or natives of other tribes. We have no information as to the distribution of cases between these and Masai. The following table shows the results expressed as percentages of the number of cases analysed :—